

Oral Health a Part of Total Health

Each year in February, the nation turns its focus to oral health in observance of Children's Dental Health Month. However, oral health issues do not begin or end in February. In June of 2000, U.S. Surgeon General David Satcher, M.D. reminded us that "oral health means much more than healthy teeth." And in May of 2003, the Surgeon General's office launched a "call to action," creating critical partnerships at all levels. The goals are to promote oral health, improve quality of life, and eliminate oral health disparities.

Dental health is not appreciated to the extent of physical health; despite recent research that dental disease has a widespread physical impact. Currently, it is the most common preventable infectious disease. Oral diseases are progressive and cumulative and can affect not only one's health, but also one's speech, appearance and self-esteem. Studies have shown an association between dental health and growth. The growth of children was accelerated after having been previously stunted and reached the average height after treatment of dental disease.¹ Children with dental diseases may have limited food choices. Without teeth or with tooth pain, it is difficult to chew healthy, crunchy foods such as some fruits and vegetables. Dental caries are also aesthetically displeasing and may affect self-esteem and social behavior. Social development is a crucial aspect of overall child development and dental disease may thereby have an impact on participation and success in school. As children become adults, there is a significant increase in the odds of heart disease among patients with periodontal disease.² Several studies also indicate a relationship between oral health and poor pregnancy outcomes.² Furthermore, more than 90% of all systemic diseases have oral manifestations.²

Most disconcerting is that 80% of untreated dental cavities are experienced by only 25% of children.² Additionally, substantial disparities in untreated cavity prevalence exist among racial/ethnic groups: 80% African-American, 71% Asian, 66% Latino/Hispanic, and 42% White.³ Dental diseases are, however, preventable and there are many things that a health professional can do in the clinical setting and beyond to curb this "epidemic."

Access to dental care is key, but can be limited due to several factors, including lack of insurance and appropriate dental intervention. Nationally, for every child without medical insurance, there

are 2.6 without dental insurance.² Physicians are often the only healthcare provider seen regularly. Given this fact, these providers have a great opportunity to prevent dental disease by:

- Providing an oral health risk assessment
- Performing an oral screening exam as part of the routine physical exam
- Evaluating fluoride intake and prescribing fluoride supplements and fluoride varnish
- Providing appropriate referrals

The American Academy of Pediatric Dentistry recommends a dental visit by the age of one. Children should receive preventive care from a dental provider at least once a year. High-risk populations should obtain preventive care twice each year. Physicians have the unique opportunity to encourage a dental visit during a well-baby or well-child exam. In addition, during routine well child exams, the physician has an opportunity to promote oral health through anticipatory guidance. Guidance should include:

- Discussion about growth and development
- Demonstration of a lift the lip exam
- Encouragement of daily oral hygiene care
- Discussion of age-related risks and protective factors including mouth guards
- Discussion of nutritional habits, including appropriate use of the bottle and sippy cups
- Use of fluoride supplementation

The County of San Diego is aggressively addressing this epidemic by conducting community awareness campaigns, educating various professional and community groups, providing no-cost sealant and fluoride varnish clinics for children with no resources for preventive care, and advocating for increased access to care.

For more information on dental health news, local activities, or to download patient education materials, visit the Share the Care/Dental Health Initiative website at www.sharethecaredental.org or call Peggy Yamagata R.D.H., M.Ed. at 619-692-8858.

¹ Acs G, et al., Continuing Education in Dentistry. 1998: 19(2).

²USDHHS. Oral Health in America: A Report of the Surgeon General. 2000.

³ Pollick JF, et al., Report of the California Oral Health Needs Assessment of Children, 1993-94.

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